

NASHUA ARTS COMMISSION
LOCAL* CENTRALIZED ARTIST DATABASE INPUT FORM

Date: _____

Name: _____

Organization (if applicable): _____

Address: _____

Phone: _____

E-Mail: _____

Website: _____

Other Links: _____

Individuals: (select one)

☐ Visual Artist ☐ Performing Artist ☐ Literary Artist ☐ Media Artist

☐ Multi-Disciplinary ☐ Non-Artist

Organizations:

Type of institution _____

Primary Artistic Discipline _____

Please send this form to eracioppi@comcast.net.

*Local: within 25 miles of Nashua